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Seattle, Wash.

Plague rats have been found at intervals in Seattle, Wash., since September 30, 1913, the last one reported being discovered August 7, 1914, at the intersection of First and Columbia Streets.

California.

The following table, taken from a report dated July 30, 1914, from Surg. Long, of the United States Public Health Service, gives a history of plague in California:

Places in California.	Date of last case of human plague.	Date of last case of rat plague.	Date of last case of squirrel plague.	Total number rodents found infected since May, 1907.
Cities:				
San Francisco	Jan. 30, 1908	Oct. 23, 1908	None	398 rats.
Oakland	Aug. 9, 1911	Dec. 1, 1908	do	126 rats.
Berkeley	Aug. 28, 1907	None	do	None.
Los Angeles	Aug. 11, 1908	do	Aug. 21, 1908	1 squirrel.
Counties:				
Alameda (exclusive of Oakland and Berkeley).	Sept. 24, 1909	Oct. 17, 1909[1]	July 14, 1914	282 squirrels, 1 wood rat.
Contra Costa	May 17, 1914	None	July 13, 1914	1,556 squirrels.
Fresno	None	do	Oct. 27, 1911	1 squirrel.
Merced	do	do	July 12, 1911	5 squirrels.
Monterey	do	do	Apr. 10, 1914	6 squirrels.
San Benito	June 4, 1913	do	July 3, 1914	35 squirrels.
San Joaquin	Sept. 18, 1911	do	Aug. 26, 1911	18 squirrels.
San Luis Obispo	None	do	Jan. 29, 1910	1 squirrel.
Santa Clara	Aug. 31, 1910	do	July 23, 1913	25 squirrels
Santa Cruz	None	do	May 17, 1910	3 squirrels.
Stanislaus	do	do	June 2, 1911	13 squirrels.

[1] Wood rat.

MEASLES AND ITS CONTROL.

EACH CASE A POSSIBLE EPIDEMIC.

[From the Bulletin of the Kansas State Board of Health for July, 1914.]

Measles is most highly contagious in the preeruptive or catarrhal stage. Its early symptoms being those of a bad cold, people either fail to arrive at a diagnosis until the eruption occurs, or else prefer to deceive themselves into the belief that the condition is nothing more than a cold, failing to recognize that even colds are communicable and infectious. But it is this particular phase of the disease which accounts for its rapid dissemination, and many persons are almost of the belief that the measles infection evolves itself out of the atmosphere, regardless of whether it came from a previous case or not. The following history may account for some of the mystery of its spread, which, after all, like an expose of prestidigitation, is no mystery at all. It happened in one county in Kansas.

A farmer and stockman from the little town of A. went to Kansas City with a carload of stock. Nine days later he had a bad cold. He spent two days wandering from store to store in the little town telling his friends what a fearful thing his cold was. On the third day the eruption occurred and his physician tacked up a measles sign on the house.

But it was too late. Two weeks later 28 of his friends who had listened sympathetically to his "cold" troubles also had the measles. In two weeks more 28 other cases resulted, and two weeks later 30 cases—86 in all. That, being nearly the entire population of the town, ended the epidemic in that community.

But of the first crop of 28 cases at A. one visited the home of a physician in the city of B. The physician, not knowing his child was exposed, permitted its attendance at school regularly, and the child "broke out" in school. From this child it spread to 43 families, or 90 cases.

A visitor from the city of C. in the town of A. came home, attended the city schools of C., and the disease spread to over 100 cases there.

During county examinations held in C., and at the height of the epidemic there, a pupil from the city schools of D. was exposed to the infection. In spite of this knowledge this pupil did not cease school attendance, and 30 cases resulted in D.

Pretty fair record, isn't it? Over 300 cases of measles, several hundred dollars in doctor bills, several more hundred dollars in loss of time and wages, demoralization of school schedules in four different towns, and all because one man with a "bad cold" hadn't learned that it was his Christain and civic duty to keep his cold at home, where it belonged.

On the other hand, in the same community, here's what might have happened, and in fact did happen.

A man coming from the Northwest was exposed to measles on the train. Realizing he had a bad cold, he remained at home. Eleven members of the family, from the baby 6 months old to the grandmother 70 years old, had the disease, but the family warned their neighbors, stayed at home, and no spread resulted.

A second man, coming from the Northwest to another part of the county, was also exposed to measles. He, too, stayed at home. While his sister, a school teacher, had had the disease, yet, to avoid any possible spread of infection, she closed her school.

A student in the schools of C. went to his home in the country, after having been exposed to the disease during its height in C. When his cold developed he remained in bed, called a physician, who recognized the possibility of its being infectious, and quarantined, and while three other children in the family took the disease, yet there were no other infections from that house.

Which pays best in the community—the restriction of one individual in spite of his yells for personal liberty and medical freedom, etc., or the loss of time and money and the suffering of several hundred persons?